Applicants : Lars Eric Sundstrom et al.
Appln. No. : 10/719,599
Page : 17

REMARKS

Claims 1 and 17-33 have been amended. Claims 1-43 are currently pending in the application.

Claims 1 and 33 have been amended to correct minor typographical errors, and claims 17-32 have been amended to facilitate grouping of these claims with claims 1-16 (method of protecting a mammal from neuronal damage).

Restriction Requirement

In response to the restriction requirement, Applicants elect for further prosecution on the merits the invention of Group I (claims 1-32 drawn to a method of protecting a mammal from neuronal damage).

Election Of Species

In response to the requirement set forth in the Office Action, Applicants elect the following: (a) the compound of formula A (i.e., L-arginylspermidine), as the compound which is to be administered to a subject; (b) "stroke" as the specific ischemic event; (c) "brain tissue" as the specific neuronal tissue for which damage is intended to be mitigated (or eliminated); and (d) "administration subsequent to the ischemic event" as the specific time of administration.

It is respectfully submitted that selection of a specific ischemic event is purely an academic exercise. A cerebral ischemic event involves a mismatch between cerebral blood flow and the metabolic requirements of the brain resulting in a significant deficit of metabolic intermediates (primarily oxygen and glucose) to the brain. This may occur in a specific region of the brain (focal ischemia) such as that which occurs in stroke or head injury, or may affect the whole brain (global ischemia) such as that which occurs in myocardial infarction or carotid artery disease. In all cases, response of the cells within the brain will be the same, i.e., a well defined series of events termed the "ischemic cascade." As such, it is more than likely that any drug that acts at the level of the brain (rather than the vasculature) is likely to be effective in preventing neuronal damage in any of these ischemic conditions. Therefore, it is inappropriate to separate them into categories of ischemic event.

Applicants : Lars Eric Sundstrom et al.
Appln. No. : 10/719,599
Page : 18

It is believed that Applicants' election of a brain tissue as the required specific neuronal tissue is adequately specific. It is not feasible to suggest any further subdivision of the brain because of the nature of the ischemic insults that the method aims to treat. Stroke and head injury do not occur in any single region of the brain. Rather, the area of ischemia will be defined by the site of the vascular lesion (stroke) or primary site of damage (head injury). In the case of global ischemia, the entire brain is potentially at risk, and not just any one sub-region.

The requirement for an election of a specific time for administering the defined compounds is also inappropriate. It is most likely that the compounds would be administered after the onset of ischemia. However, this does not fit nicely into the categories identified in the Office Action because the ischemic event may be ongoing (such as in stroke where the vascular lesion is likely to remain in place) or may have ceased (such as in myocardial infarction after CPR has been administered) by the time the compound is administered. Thus, a more appropriate election which does not correspond with the listed categories is "after a diagnosis of cerebral ischemia has been made."

Claims 1-8 and 17-25 are believed to read on the elected species, i.e., the fully defined compound, the identified ischemic event, the specifically identified neuronal tissue, and the specifically identified time of administration of the selected compound.

CONCLUSION

In view of the above amendments and remarks, it is respectfully submitted that the application is in condition for allowance and notice of the same is requested.

Respectfully submitted,

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Date

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